| PATENT APPLICATION FEE DETERMINATION RECORD 09/755657 |  |  |                                       |                                   |              |                  |             |                    |  |       |                    |                        |  |  |
|---|--|--|---------------------------------------|-----------------------------------|--------------|------------------|-------------|--------------------|--|-------|--------------------|------------------------|--|--|
| Î   | CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |                                       |                                   |              |                  |             |                    | SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY |       |                    |                        |  |  |
| TO  | OTAL CLAIMS                                      |  |                                       |                                   |              |                  |             | RATE               | FEE  | ]     | RATE               | FEE                    |  |  |
| FOR   |  |  | NUMBER FILED                          |                                   | NUMBER EXTRA |                  |             | BASIC FE           | E 150.00                                     | OR    | BASIC FEE          | 300.00                 |  |  |
| TC  | TAL CHARGE                                       | ABLE CLAIMS                                | minus 20=                             |                                   |              |                  |             | X\$ 25=            |  | OR    | X\$50=             |                        |  |  |
| int   | SEPENDENT C                                      | LAIMS                                      | minus 3 =                             |                                   |              |                  |             | ;X100=             |  | OR    | X200=              |                        |  |  |
| ML  | ILTIPLE DEPEN                                    | (DENT CLAIM P                              | RESENT                                |                                   |              | . 🗅.             | +180=       |                    | 1  | 1     | +360=              |                        |  |  |
| * If  | the difference                                   | in column 1 is                             | less than zero, enter "0" in column 2 |                                   |              | cotumn 2         |             | TOTAL              |  | OR    | TOTAL              | <u> </u>               |  |  |
| 1/17/06 CLAIMS AS AMENDED - PART II                   |  |  |                                       |                                   |              |                  |             |                    | <u> </u>                                     | jon   | OTHER              | THAN                   |  |  |
|   | (Column 1) (Column 2) (Column 3)                 |  |                                       |                                   |              |                  |             | SMALL              | ENTITY                                       | OR    | SMALL              |                        |  |  |
| AMENDMENT A   | <i>u</i> . ·                                     | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |                                       | HIGH<br>NUME<br>PREVIO<br>PAID I  | BER<br>USLY  | PRESENT<br>EXTRA |             | RATE               | ADDI:<br>TIONAL<br>FEE                       |       | RATE               | ADDI-<br>TIONAL<br>FEE |  |  |
|   | Total  | . 65                                       | Minus ·                               | - 6                               | <u>Z.</u>    | <b>4</b> .       |             | X\$ 25=            | 1.   | OR    | X\$50=             | 1                      |  |  |
|   | Independent                                      | • 7  | Minus                                 | essa (                            | 7            | P. /             |             | X100=              | 1  | OR    | X200=              |                        |  |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |                                       |                                   |              | 1                | +180=       |                    | OR   | +360= |                    |                        |  |  |
|   | 101107   |  |                                       |                                   |              |                  | ŧ           | TOTAL              |  |       | TOTAL              | 1                      |  |  |
| •   | (Column 1) (Column 2) (Column 3)                 |  |                                       |                                   |              |                  | _ ′         | ACOIT. FEE         |  | , ,   | ADDIT, FEE         |                        |  |  |
| AMENDMENT B   | •  | CLAIMS<br>REMAINING<br>'AFTER<br>AMENDMENT | •                                     | HIĞHI<br>NUME<br>PREVIO<br>PAJD F | IER<br>USLY  | PRESENT<br>EXTRA |             | RATE               | ADDI-<br>TÌONAL<br>FEE                       |       | RATE               | ADDI-<br>TIONAL<br>FEE |  |  |
|   | Total  | ·105                                       | Minus                                 | -(0                               | 5/           |                  | $\mid \mid$ | X\$ 25=            | ·  | OR    | X\$50=             |                        |  |  |
|   | Independent                                      | • 7  | Minus                                 | 444 7                             | <u> </u>     |                  |             | K100=              | ·  | OR    | X200=              |                        |  |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT/CLAIM ! |  |                                       |                                   |              |                  | ן ו         | 180=               | <i>:</i> ·                                   | OR    | +360=              |                        |  |  |
| •   |  |  |                                       |                                   |              |                  |             | POTAL<br>COIT, FEE | لنبنا  | OR ,  | TOTAL<br>DOTT. FEE | -                      |  |  |
| (Column 1) (Column 2) (Column 3)                      |  |  |                                       |                                   |              |                  |             |                    |  |       |                    |                        |  |  |
| AMENDMENT C   | 7/36/9   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |                                       | NUMB<br>PRÉVIO<br>PAID F          | er<br>Usly   | PRESENT<br>EXTRA |             | RATE               | ADDI-<br>TIONAL<br>FEE                       |       | PATE               | ADDI-<br>TIONAL<br>FEE |  |  |
|   | Total  | . 65                                       | Minus 🚊                               | • 6                               | 7            | =                |             | X\$ 25=            |  | OR    | X\$50=             |                        |  |  |
|   |  |  | Minus                                 |                                   |              | -                |             | X100=              |  | OR    | X200=              |                        |  |  |
| ب   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |                                       |                                   |              |                  |             | +1B0 <b>=</b>      | •  | OR    | +360=              |                        |  |  |
| •   |  |  | •                                     |                                   |              |                  | L           |                    |  |       | •                  | ·                      |  |  |